



PATENT
Attorney Docket No. 256.00010120
(formerly 232.00010120)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Stefan M. Pulst)
Serial No.: 08/981,998)
Filed: 11 May 1998)
For: NUCLEIC ACID ENCODING SPINOCEREBELLAR ATAXIA-2 AND
PRODUCTS RELATED THERETO)

Group Art Unit: 1655
Examiner: J. Enewold

#257
Refund
Ack
Small Entry

REFUND REQUEST UNDER 37 C.F.R. § 1.28

Assistant Commissioner for Patents
Washington, D.C. 20231

Applicant hereby respectfully requests a refund under 37 C.F.R. §1.26 in accordance with 37 C.F.R. §1.28. Applicant filed a Request for Continued Prosecution Application (CPA) and a Petition for Extension of Time by Express Mail on September 21, 2000. At the same time, the full CPA filing fee of \$690.00 and the full 3-month extension fee of \$870.00 was paid. Applicant herewith submits an executed Verified Statement of Status as a Nonprofit Organization.

Accordingly, this Request for Refund being filed within two months after payment of the fee in the amount established for a non-small entity, it is submitted that the correct filing fee to be paid is \$345.00 and the correct 3-month extension fee is \$435.00. Thus, the Applicant respectfully requests a refund of \$780.00.

CERTIFICATE UNDER 37 C.F.R. 1.8:

The undersigned hereby certifies that this paper is being deposited in the United States Postal Service, as first class mail, in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231, on this 21st day of November, 2000.

David L. Provence
David L. Provence

Date
DLP/mi

November 21, 2000

Respectfully submitted,
STEFAN M. PULST
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NONPROFIT ORGANIZATION

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
(37 C.F.R. §§1.9(f) AND 1.27(d)) - NONPROFIT ORGANIZATION**



I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF ORGANIZATION: CEDARS-SINAI MEDICAL CENTER

ADDRESS OF ORGANIZATION: 8700 Beverly Boulevard

Los Angeles, California 90048-1865

TYPE OF ORGANIZATION:

- a) () UNIVERSITY OR OTHER INSTITUTION OF HIGHER EDUCATION
b) (X) TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 U.S.C. §§501(a) AND 501(c)(3))
c) () NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA -- (NAME OF STATE _____)
(CITATION OF STATUTE _____)
d) () WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 U.S.C. §§501(a) AND 501(c)(3)) IF LOCATED IN THE UNITED STATES OF AMERICA
e) () WOULD QUALIFY AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA -- (NAME OF STATE _____)
(CITATION OF STATUTE _____)

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 13 C.F.R. §1.9(e) for purposes of paying reduced fees under Sections 41(a) and (b) of Title 35, United States Code, in regard to the invention, entitled **NUCLEIC ACID ENCODING SPINOCEREBELLAR ATAXIA-2 AND PRODUCTS RELATED THERETO** by inventor(s) **Stefan M. Pulst** described in

- a) ☐ the specification filed herewith.
b) ☒ application serial no. 08/981,998, filed 11 May 1998
c) ☐ patent no. _____, issued _____.

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above-identified invention.

If the rights held by the nonprofit organization are not exclusive, each individual, concern, or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor(s), who could not qualify as an independent inventor(s) under 37 C.F.R. §1.9(c) or by any concern that would not qualify as a small business concern under 37 C.F.R. §1.9(d) or a nonprofit organization under 37 C.F.R. §1.9(e). ***NOTE:** Separate verified statements are required from each named person, concern, or organization having rights to the invention averring to their status as small entities. (37 C.F.R. §1.27)

NAME

ADDRESS

() INDIVIDUAL

() SMALL BUSINESS CONCERN

☐ NONPROFIT ORGANIZATION

NAME _____

ADDRESS

() INDIVIDUAL

() SMALL BUSINESS CONCERN

☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 C.F.R. §1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME Peter E. Braveman

TITLE	Senior Vice President for Legal Affairs and General Counsel
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ADDRESS 8700 Beverly Boulevard, Los Angeles, California 90048

SIGNATURE

DATE _____

10/18/80